

Conjoint Board of the Colleges of Physicians and Surgeons of Ireland. In 1896 one Army candidate, name not given, was reported for bad spelling. In 1897 one Army candidate was reported for bad spelling.

## INFANTILE INSUSCEPTIBILITY TO VACCINATION.

*To the Editors of THE LANCET.*

SIRS,—It may be assumed to be generally accepted that there are several different causes which lead to the declaration that an infant is "insusceptible" to vaccination; well-known statistics such as those of Dr. Cory seem to show that vaccination performed thrice unsuccessfully by no means implies an actual insusceptibility to vaccinia and no doubt in a large majority of cases returned as "insusceptible" the vaccinator has been at fault either by scratching too minute an area of skin or by using inactive lymph, or, as has often been found, the mothers have prevented the success of the operation by purposely washing or otherwise interfering with the "places" immediately the vaccination has been completed. It will probably be agreed, however, that if such causes of failure are set aside there is a small residuum of cases truly insusceptible in the sense that vaccination of infants properly performed with efficient lymph on three occasions with intervals of a few weeks or months between them has failed altogether; and most vaccinators would recognise a degree of partial insusceptibility where out of several insertions of efficient vaccine over a considerable area made on each of two or more occasions at most a single small vesicle has resulted.

The purpose of my letter is to inquire of those who have had large experience of vaccination whether any information can be furnished of the relation, if any, between such truly insusceptible or partially insusceptible infants and the condition as to vaccination or variolation of the parents—particularly of the mothers. In the case of an infant born to a mother actually suffering from small-pox there are recorded instances in which the infant, vaccinated on several occasions with efficient lymph and remaining exposed to variola, has developed neither vaccinia nor variola. This appears to be the extreme case of true insusceptibility dependent on the maternal condition. Are there known comparable instances in which an infant has been born to a mother actually suffering from vaccinia and has proved insusceptible to vaccinations properly performed with efficient lymph? And, going further back, what has been the condition as to insusceptibility or partial insusceptibility of infants born to mothers who have suffered from variola or vaccinia before but not long antecedent to parturition? And, again, how long after birth does this insusceptibility last?

Beyond two cases recently under my observation of infants whose mothers had been successfully revaccinated shortly before commencement of pregnancy and who, after several vaccinations with lymph perfectly efficient and active when used in other cases both before and after these failures, presented in one case no reaction and in the other a single small vesicle on the second time of vaccinating, I am unable to contribute any facts upon the subject. But the matter has considerable interest and in Gloucester, Middlesbrough, and other places where no doubt there has lately been a considerable number of mothers vaccinated during pregnancy or having small-pox during or immediately antecedent to pregnancy there may have been several opportunities of observing what, if any, has been the degree of insusceptibility of their infants to vaccination.

I am, Sirs, your faithfully,

Chiswick-lane, W., Dec. 9th, 1898.

G. P. SHUTER.

## "THE 'OPEN-AIR' TREATMENT OF TUBERCULOSIS."

*To the Editors of THE LANCET.*

SIRS,—When my letter on the "open-air" treatment of tuberculosis was inserted in your issue of Nov. 26th, that letter was written in London. This is dated from Arosa, at a height of over 6000 ft. in Switzerland. My letter has called forth a few remarks, one or two of which I should like to notice. I think Dr. Lionel Beale exactly hits it off when he says that life to be spent "in the contemplated sheds in many parts of England in such weather as we have lately enjoyed, would not be happy," and he might have

added anything but beneficial. Then "M.O.H." proposes to erect at a cost of some £200 a heated greenhouse or glasshouse. One point seems to be entirely omitted and that is, as I before tried to emphasise, the essentials of these Alpine resorts—viz., intense *dryness* of the air, absence of wind, an intense *cold* dryness, brilliant hot sunshine, and lastly, the automatic expansion constantly going on of the lung under the atmospheric conditions such as cause the barometer to stand at from 24 in. to 23 in., and I still maintain that none of these conditions are in any way present or can be produced in England at any time of the year. Either the necessity for treatment under these conditions is a complete error or the method of building sanatoria in England is a mistake. Certainly the methods or theories in the treatment in England or in the high Alps in no way resemble each other. The conditions are, and must be, entirely different. I write as regards the *cure*—the permanent cure in many cases—of pulmonary tuberculosis, and I do really believe that the establishment in England of such sanatoria, though leading to possible improvement at the time owing to the greatly improved hygienic conditions and surroundings, will never in the same or even in more than a very minor degree lead to the arrest and cure of pulmonary tuberculosis.

I would add that the suggested cost of the glass erection suggested by "M.O.H." would more than pay for two seasons in the high Alps and he seems also to miss one of the chief points, and that is that the air in his "house" would be of necessity breathed and rebreathed. It is like applying a dirty dressing to a wound and it is only by being in the absolutely open air—not in rooms with even the windows open—that the same air is never breathed twice over. The healthy lung may not actually suffer from inhaling the air over more than once—though it can certainly do it no good—but to the diseased lung the air breathed should be absolutely pure and this can only be obtained out of doors and not inside any building. I would finish by adding that Dr. Lionel Beale's description of the weather—four days of damp fog and wet and wind—more than fully confirms what I say about the impracticability of really carrying out the true "open-air" treatment of tuberculosis in England. I think I may say that unless it has been seen in its entirety as carried out here and in other high health resorts it is impossible to appreciate one-tenth of its benefits or the advantages to be derived from it or the actual methods employed.

I am, Sirs, yours faithfully,

Arosa, Dec. 14th, 1898.

A. G. P. GIPPS.

## "COPYRIGHT IN PRESCRIPTIONS."

*To the Editors of THE LANCET.*

SIRS,—You were good enough to publish a letter from me on the above subject some time ago<sup>1</sup> in which I advocated a scheme which would limit the use of prescriptions to the purposes for which they were intended, by granting copyright in them to their authors. By this means it would be easy to prevent a prescription written for a particular person at a particular time and in particular circumstances from abuse by being made up over and over again for an indefinite time and used at times and in manners and perhaps even by other persons which were never contemplated by the physician who was the author of the prescription. It is so clear to my mind that the author of a prescription should have control to such an extent of the way that it is applied that I feel sure that such an arrangement as I suggest must be brought about sooner or later, both as a matter of bare justice to medical men and also as conducive to the public welfare. A case that strongly enforces the desirability of such a scheme being carried out has lately come to my knowledge and is as follows:—

An inquest was held on Dec. 14th by Mr. Troutbeck, the coroner for Westminster, on the body of a lady, aged about fifty years. The jury returned a verdict of "Accidental death from an overdose of chloral hydrate." The following facts were given in evidence. The deceased had bought on Dec. 9th a 12 oz. bottle of a solution (syrup?) of chloral, containing 80 grains to the ounce, at one of the so-called coöperative stores. This bottle was obtained by means of a prescription that had been written for the deceased's husband who had died five years previously. His widow (the subject of the present inquest) had had it made up frequently

<sup>1</sup> THE LANCET, July 16th, 1898.